

RICHARD WILLIAMS

(Name)

480 ALTA ROAD

(Address)

SAN DIEGO, CA 92179

(City, State, Zip)

BR1817

(CDCR / Booking / BOP No.)

FILED

May 25 2022

CLERK, U.S. DISTRICT COURT
SOUTHERN DISTRICT OF CALIFORNIA
BY s/ shelly DEPUTY**United States District Court
Southern District of California**Richard Williams

(Enter full name of plaintiff in this action.)

Plaintiff,

v.

LA. COUNTY SHERIFFS
DEPT.

(Enter full name of each defendant in this action.)

Defendant(s).

Civil Case No. '22 CV0768 RBM MDD

(To be supplied by Court Clerk)

Complaint under the
Civil Rights Act
42 U.S.C. § 1983**A. Jurisdiction**

Jurisdiction is invoked pursuant to 28 U.S.C. § 1343(a)(3) and 42 U.S.C. § 1983. If you wish to assert jurisdiction under different or additional authority, list them below.

B. Parties1. **Plaintiff:** This complaint alleges that the civil rights of Plaintiff, Richard Williams
(print Plaintiff's name)
, who presently resides at 480 Alta Road San Diego, CA 92179
(mailing address or place of confinement)RJ DONOVAN STATE PRISON, were violated by the actions ofthe below named individuals. The actions were directed against Plaintiff at San Diego County JailLA County Sheriff Dept. on (dates) Sept 9, 2021, Aug 7 2019, and 2015
(institution/place where violation occurred) (Count 1) (Count 2) (Count 3)

2. Defendants: (Attach same information on additional pages if you are naming more than 4 defendants.)

Defendant Sheriffs Dept. resides in Los Angeles
(name) (County of residence)

and is employed as a County Sheriff's Officer. This defendant is sued in
(defendant's position/title (if any))

☒ his/her ☒ individual ☐ official capacity. (Check one or both.) Explain how this defendant was acting under
color of law: RACIAL DISCRIMINATION AGAINST OFFICER USING

INMATES TO INFLECT INJURY UPON MY PERSON - BODY. OFFICERS REFUSE
TO FILE CHARGES ON INMATES WHO ATTACKED ME. ALTERING CASE DOCKETS.

Defendant Sheriffs Dept resides in Los Angeles
(name) (County of residence)

and is employed as a County Sheriff's Officer. This defendant is sued in
(defendant's position/title (if any))

his/her ☐ individual ☐ official capacity. (Check one or both.) Explain how this defendant was acting under
color of law: FILING FRAUDULENT CHARGES AGAINST ME DUE TO RACIAL

PROFILING. INFLECTING CORPORAL PUNISHMENT WITH CHEMICAL
AGENTS & PHYSICAL FORCE. ALLOWING RAPE SUSPECTS TO BE RELEASED FROM JAIL

Defendant Sheriffs Dept resides in Los Angeles
(name) (County of residence)

and is employed as a County Sheriff's Officer. This defendant is sued in
(defendant's position/title (if any))

his/her ☐ individual ☐ official capacity. (Check one or both.) Explain how this defendant was acting under
color of law: ALLOWING INMATES TO ASSAULT ME & STOMP ME

UNCONSCIOUSLY INFLECTING BODILY HARM UPON ME. DUE TO
RACIAL PROFILING.

Defendant Sheriffs Dept resides in Los Angeles
(name) (County of residence)

and is employed as a County Sheriff's Officer. This defendant is sued in
(defendant's position/title (if any))

his/her ☐ individual ☐ official capacity. (Check one or both.) Explain how this defendant was acting under
color of law: SHERIFF OFFICERS TAMPERING WITH EVIDENCE

SO D.A. DONT PICK UP CASE ON INDIVIDUALS WHO
ATTACKED ME. ALSO BEING BLAMED BY OFFICERS.

C. Causes of Action (You may attach additional pages alleging other causes of action and the facts supporting them if necessary.)

Count 1: The following civil right has been violated: 6 Amendment
~~Rights to have rights preserved~~ (E.g., right to medical care, access to courts,
 due process, free speech, freedom of religion, freedom of association, freedom from cruel and unusual punishment, etc.)

Supporting Facts: [Include all facts you consider important to Count 1. State what happened clearly and in your own words. You need not cite legal authority or argument. Be certain to describe exactly what each defendant, by name, did to violate the right alleged in Count 1.]

Since year 2015 to 2021 I have been racially profile by the L.A. Sheriff Department. I have been assaulted by Inmates and also Sheriff Officers, also ~~they~~ refused me to write the right to testify ~~the~~ against defendants. Physical force being afflicted on every other daily basis, being treated as a slave, as a Black American Negro. You have to see it for yourself to believe it. Last incident occurred September 29, 2021, in the L.A. County Sheriff Department, Housing location 9500, 9000 Floor, Where Video footage capturing L.A. County Sheriff allowing Inmates to stomp my brains in and sodomize my body against my will. Inmates Kicking my face in and damn near beating me to death. Also do to negligence of L.A. Sheriff Department and racial profiling suspects are allowed to get away. This incident happen under Booking # 6252428. Also this is retaliation of L.A. County Sheriff and etc.

Count 2: The following civil right has been violated: 13th Amendment Right

I was treated like a slave (E.g., right to medical care, access to courts, due process, free speech, freedom of religion, freedom of association, freedom from cruel and unusual punishment, etc.)

Supporting Facts: [Include all facts you consider important to Count 2. State what happened clearly and in your own words. You need not cite legal authority or argument. Be certain to describe exactly what each defendant, by name, did to violate the right alleged in Count 2.]

~~Sexually Assaulted by I~~ I was
Sexually Assaulted by Inmates while
in incarcerated in the L.A. County Sheriff
Department three different times while
housed in the L.A. County Sheriff Department,
2019, 2020, and 2021 three different times the Sheriff's
withheld the video evidence and refused and
tampered with the rape kit so no case could be
file and also this was the result of another
racial profiling. Sheriff's continue to fabricate
from their own mouths what actually happened,
They blandered me and said I was some kind
of nut case. Video footage, I was taken to
the outside Hospital where a rape kit was
conducted and no detectives came to evaluate
the rape kit evidence and etc.

D. Previous Lawsuits and Administrative Relief

1. Have you filed other lawsuits in state or federal courts dealing with the same or similar facts involved in this case? ☐ Yes ☒ No.

If your answer is "Yes", describe each suit in the space below. [If more than one, attach additional pages providing the same information as below.]

(a) Parties to the previous lawsuit:

Plaintiffs: _____

Defendants: _____

(b) Name of the court and docket number: _____

(c) Disposition: [For example, was the case dismissed, appealed, or still pending?] _____

(d) Issues raised: _____

(e) Approximate date case was filed: _____

(f) Approximate date of disposition: _____

2. Have you previously sought and exhausted all forms of available relief from the proper administrative officials regarding the acts alleged in Part C above? [E.g., CDCR Inmate/Parolee Appeal Form 602, etc.] ? ☒ Yes ☐ No.

If your answer is "Yes", briefly describe how relief was sought and the results. If your answer is "No", briefly explain why administrative relief was not exhausted.

Attacked at Los Angeles County Jail for grievance form
Administrative Relief exhausted. Do to L.A. County grievance
Not Attached to back, To Better exhaust ALL Remedy!

E. Request for Relief

Plaintiff requests that this Court grant the following relief:

1. An injunction preventing defendant(s):

Processation Injunction
Gag Order a federal Imbargo from leaving the state
of California. Injunction preventing Law-Enforcement
from Filing Case Files. An Imbargo from firing processation.

2. Damages in the sum of \$ 75 Million.
 3. Punitive damages in the sum of \$ 25 Million.
 4. Other: Violation of 13th admendment, \$10 Million

F. Demand for Jury Trial

Plaintiff demands a trial by ☒ Jury ☐ Court. (Choose one.)

G. Consent to Magistrate Judge Jurisdiction

In order to insure the just, speedy and inexpensive determination of Section 1983 Prisoner cases filed in this district, the Court has adopted a case assignment involving direct assignment of these cases to magistrate judges to conduct all proceedings including jury or bench trial and the entry of final judgment on consent of all the parties under 28 U.S.C. § 636(c), thus waiving the right to proceed before a district judge. The parties are free to withhold consent without adverse substantive consequences.

The Court encourages parties to utilize this efficient and expeditious program for case resolution due to the trial judge quality of the magistrate judges and to maximize access to the court system in a district where the criminal case loads severely limits the availability of the district judges for trial of civil cases. Consent to a magistrate judge will likely result in an earlier trial date. If you request that a district judge be designated to decide dispositive motions and try your case, a magistrate judge will nevertheless hear and decide all non-dispositive motions and will hear and issue a recommendation to the district judge as to all dispositive motions.

You may consent to have a magistrate judge conduct any and all further proceedings in this case, including trial, and the entry of final judgment by indicating your consent below.

Choose only one of the following:

☐ Plaintiff consents to magistrate judge jurisdiction as set forth above.

OR

☒ Plaintiff requests that a district judge be designated to decide dispositive matters and trial in this case.

 Date

Richard Williams
 Signature of Plaintiff

REFERENCE NUMBER: 510-2021-0924-018	Is this grievance an emergency? ¿Es ésta queja una emergencia? <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">YES*</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">NO</div> </div>		COUNTY OF LOS ANGELES SHERIFF'S DEPARTMENT INMATE GRIEVANCE FORM See the back copy for instructions. All grievances must be filed within 15 calendar days. Grievances will be responded to within 15 calendar days. Appeals must be filed within 15 calendar days. Only one grievance per form. Solamente una queja por forma.				
	If this is a medical or mental health emergency or you are aware of a specific and immediate threat to your life/safety, notify custody personnel immediately. Si ésta es una emergencia médica o de salud mental, o si tiene conocimiento de una amenaza específica e inmediata contra su vida/seguridad, notifique a un alguacil de inmediato.		NAME NOMBRE	BOOKING NUMBER SU NÚMERO DE PRESO	FACILITY FACILIDAD	HOUSING LOC. LUGAR DE VIVIENDA	DATE FECHA
			Richard Williams	6252428	MCJ	9500	9-29-21
	I HAVE A GRIEVANCE ABOUT THE FOLLOWING:						
GENERAL SERVICES <input type="checkbox"/> Living conditions <input type="checkbox"/> Food <input type="checkbox"/> Showers <input type="checkbox"/> Property <input type="checkbox"/> Mail <input type="checkbox"/> Commissary/Account Balance <input type="checkbox"/> Clothing/Linen/Bedding <input type="checkbox"/> Educational/Vocational Programs <input type="checkbox"/> Other (explain below)		MEDICAL/MENTAL <input type="checkbox"/> Medical Services (Place in envelope) <input type="checkbox"/> Mental Health (Place in envelope) <input type="checkbox"/> Dental (Place in envelope) <input type="checkbox"/> Americans with Disabilities Act (ADA) <input type="checkbox"/> Other (explain below)		STAFF <input checked="" type="checkbox"/> Custody Personnel <input type="checkbox"/> Medical Staff <input type="checkbox"/> Mental Health Staff <input type="checkbox"/> Other (explain below) Optional (check only if applicable): <input type="checkbox"/> Use of force <input checked="" type="checkbox"/> Retaliation <input checked="" type="checkbox"/> Harassment <input checked="" type="checkbox"/> Racial or identity profiling Specify the type(s) in your explanation. (please refer to the reverse side of the pink copy for more information)			
PLEASE EXPLAIN THE SPECIFIC ISSUE OR DATE OF INCIDENT, AND THE ACTION REQUESTED:							
DATE, TIME, DAY OF OCCURRENCE L.A. 2014-2021		FACILITY OF OCCURRENCE L.A. County Jail		LOCATION OF OCCURRENCE County Jail			
L.A. While housed in the L.A. County Jail on numerous occasions harassed by racial profiling rendered by L.A. County Sheriff Department, Case files being used as a form and method of racism, rape kit being tampered w/ and misplaced.							
<input type="checkbox"/> In the event I am released prior to the disposition of this grievance, I waive my right to receive a mailed notification of the resolution. <input type="checkbox"/> In the event I am released prior to the disposition of this grievance, I would like to receive a mailed notification of the resolution. Mailing address _____ City _____ State _____ ZIP _____ Phone (____) _____							
Attention: Conflict Resolution may be available and is voluntary for both the inmate and the involved personnel to address a grievance instead of the Department conducting a personnel investigation and determining a finding to resolve the grievance.							
Inmate's Signature x <u>Richard Williams</u>							

FOR DEPARTMENT USE ONLY - DO NOT WRITE BELOW THIS LINE

Employee Receiving Grievance		Employee #	Date and Time of Collection and Review
			TIME STAMP HERE
EMERGENCY GRIEVANCES ONLY	*Watch commander notified of emergency grievance: _____ Name _____ Employee # _____ Date/Time _____ This grievance <input type="checkbox"/> was <input type="checkbox"/> was not handled as an emergency. If not, please explain below. Note: Any aspect of an emergency grievance determined to be non-emergent will be processed within the standard time frame.		
	If a disposition was rendered, please complete:		
	FINDINGS	RELIEF	BRIEF SUMMARY OF ACTIONS TAKEN
	<input type="checkbox"/> SUSTAINED	<input type="checkbox"/> GRANTED	
	<input type="checkbox"/> SUSTAINED IN PART	<input type="checkbox"/> GRANTED IN PART	
	<input type="checkbox"/> NOT SUSTAINED	<input type="checkbox"/> DENIED	
	<input type="checkbox"/> INCONCLUSIVE	<input type="checkbox"/> RELIEF UNAVAILABLE	
	Full disposition shall be entered in the Custody Automated Report Tracking System (CARTS). Inmate was notified of disposition/status/modification by: _____ (Supervisor), on _____ (Date/Time).		
Supervising Nurse Receiving Grievance		Employee #	Date and Time of Review
			TIME STAMP HERE

FRONT PART 1 (WHITE COPY)

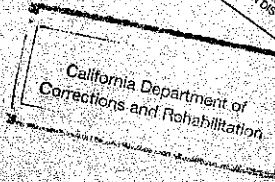
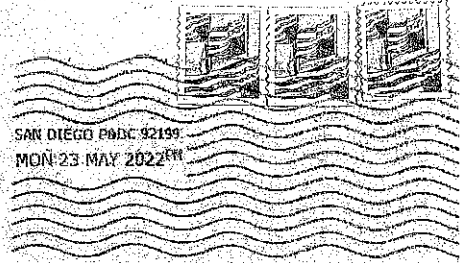
CIVIL COVER SHEET (E-FILED FROM CDCR ONLY)

This civil cover sheet and the information contained herein neither replaces nor supplements the filing and service of pleadings or other papers required by law. This form is authorized by General Order No. 653A dated June 21, 2018, and is approved by the Clerk of the Court. This civil cover sheet is required on all cases filed by plaintiffs housed at institutions participating in the e-filing pilot program described in the General Order.

I. PLAINTIFF <i>(to be Completed by Plaintiff)</i> <div style="font-size: 1.2em; font-family: cursive;">Richard, Williams</div> <input type="checkbox"/> Exhibits to follow	II. DEFENDANT(S) <i>(to be Completed by Plaintiff)</i> <div style="font-size: 1.2em; font-family: cursive;">L.A. County SHERIFF'S DEPARTMENT.</div>
III. INSTITUTION BEING E-FILED FROM <i>(To be Completed by CDCR Staff Member)</i> CDCR Institution Abbreviation Code:	
IV. DATE SCANNED AND EMAILED BY CDCR STAFF MEMBER <i>(to be Completed by CDCR Staff Member)</i> BY: _____ <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <i>(Please SIGN Name)</i> <i>(Please PRINT Name)</i> </div> DATE SCANNED AND EMAILED: _____	
V. IF CIVIL COMPLAINT CANNOT BE E-FILED <i>(to be Completed by CDCR Staff Member)</i> X This civil complaint, and other initial filing documents authorized by the General Order No. 653A are authorized to be filed through the U.S. mail and accepted by the Clerk of the Court without need to be electronically filed because the digital sender/scanner was down for more than 48 hours. <u>See</u> General Order 653A at 3.	
DATED: _____ <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <i>(Please SIGN Name)</i> <i>(Please PRINT Name)</i> </div>	

See attached "Instructions for Filing Civil Rights Complaints Under 42 U.S.C. § 1983"

Richard Williams
BR 1817 / A1. 209
R.J. Dario
480 Alta Rd
San Diego, Calif. 92177



Clerk of the U.S. District Court:
633 West Broadway, Suite 420
San Diego, Calif. 92101

Legal Mail

